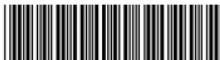


<b><i>Index of Claims</i></b>	<b>Application/Control No.</b>	<b>Applicant(s)/Patent Under Reexamination</b>
	10665725	LIEW ET AL.
	<b>Examiner</b>	<b>Art Unit</b>
	JOHN F RAMIREZ	3737

✓	<b>Rejected</b>	-	<b>Cancelled</b>	N	<b>Non-Elected</b>	A	<b>Appeal</b>
=	<b>Allowed</b>	÷	<b>Restricted</b>	I	<b>Interference</b>	O	<b>Objected</b>

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant			<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47
<b>CLAIM</b>		<b>DATE</b>			
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8	-	-			
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10	N	N			
11	-	-			
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13	✓	✓			
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15	N	N			
16	N	N			
17	N	N			
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20	N	N			
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30	N	N			
31	N	N			
32	N	N			
33	N	N			
34	N	N			
35	N	N			
36	N	N			

<b><i>Index of Claims</i></b>	<b>Application/Control No.</b>	<b>Applicant(s)/Patent Under Reexamination</b>
	10665725	LIEW ET AL.
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=	<b>Allowed</b>	÷	<b>Restricted</b>	I	<b>Interference</b>	O	<b>Objected</b>

Claims renumbered in the same order as presented by applicant  CPA  T.D.  R.1.47

<b>CLAIM</b>		<b>DATE</b>					
Final	Original	02/27/2008	11/24/2008				
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71	-	-					
72	-	-					

<b><i>Index of Claims</i></b>		Application/Control No.		Applicant(s)/Patent Under Reexamination	
		10665725		LIEW ET AL.	
		Examiner		Art Unit	
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=	Allowed	÷	Restricted	I	Interference	O	Objected

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47	
CLAIM		DATE					
Final	Original	02/27/2008	11/24/2008				
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	75	-	-				
	76	-	-				
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	86	-	-				
	87	-	-				
	88	-	-				
	89	✓	✓				
	90	✓	✓				
	91	✓	✓				
	92	✓	✓				
	93	✓	✓				
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	104	✓	✓				
	105	✓	✓				
	106	N	N				
	107	N	N				
	108	N	N				

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=	<b>Allowed</b>	÷	<b>Restricted</b>	I	<b>Interference</b>	O	<b>Objected</b>

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47
<b>CLAIM</b>		<b>DATE</b>				
Final	Original	02/27/2008	11/24/2008			
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111	N	N				
112	N	N				
113	✓	N				
114	N	N				
115	N	N				
116	✓	✓				
117	✓	✓				
118	✓	✓				
119	✓	✓				
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143	N	N				
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<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47	
CLAIM		DATE					
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